



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

OKAMOTO et al. Atty. Ref.: 2018-808; Confirmation No. 6130

Appl. No. 10/721,249 TC/A.U. 3747

Filed: November 26, 2003 Examiner: Carl Stuart MILLER

For: INJECTION HOLE PLATE AND FUEL INJECTION APPARATUS HAVING THE SAME

* * * * *

May 3, 2006

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

PETITION

It is respectfully requested that two of the originally named inventors be deleted pursuant 37 CFR §1.48(b). The inventors to be deleted are **Nobuo OTA and Kouichi MOCHIZUKI.**

The above named inventors are being deleted because those inventors' invention(s) are not being claimed in the above-referenced application as allowed.

Respectfully submitted,

NIXON & VANDERHYE P.C.

By:



Michelle N. Lester
Reg. No. 32,331

MNL:slj

901 North Glebe Road, 11th Floor
Arlington, VA 22203-1808
Telephone: (703) 816-4000
Facsimile: (703) 816-4100

05/19/2006 SZEWDIE1 00000108 141140 10721249
01 FC:1464 130.00 DA

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

ZF/KS

**RESPONSE UNDER RULE 312
EXPEDITED HANDLING PROCEDURES**

In re Patent Application of

OKAMOTO et al.

Serial No. 10/721,249

Filed: November 26, 2003

Title: INJECTION HOLE PLATE AND FUEL INJECTION APPARATUS HAVING THE
SAME

Atty Dkt. 2018-808

C# M#

TC/A.U.

3747

Examiner: Carl Stuart MILLER

Date: May 18, 2006

Mail Stop Issue Fee

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

 Correspondence Address Indication Form Attached.**Fees are attached as calculated below:**

Total effective claims after amendment	20	minus highest number	
previously paid for	20	(at least 20) =	0 x \$50.00
			\$0.00 (1202)/\$0.00 (2202) \$

Independent claims after amendment	4	minus highest number	
previously paid for	4	(at least 3) =	0 x \$200.00
			\$0.00 (1201)/\$0.00 (2201) \$

If proper multiple dependent claims now added for first time, (ignore improper); add	\$360.00 (1203)/\$180.00 (2203) \$
--	------------------------------------

Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s)	One Month Extension \$120.00 (1251)/\$60.00 (2251)
---	--

Two Month Extensions \$450.00 (1252)/\$225.00 (2252)
--

Three Month Extensions \$1020.00 (1253)/\$510.00 (2253)

Four Month Extensions \$1590.00 (1254)/\$795.00 (2254)
--

Five Month Extensions \$2160.00 (1255)/\$1080.00 (2255) \$
--

Terminal disclaimer enclosed, add	\$130.00 (1814)/ \$65.00 (2814) \$
-----------------------------------	------------------------------------

<input type="checkbox"/> Applicant claims "small entity" status.	<input type="checkbox"/> Statement filed herewith
--	---

Rule 56 Information Disclosure Statement Filing Fee	\$180.00 (1806) \$
---	--------------------

Assignment Recording Fee	\$40.00 (8021) \$
--------------------------	-------------------

Other: PETITION	\$ 130.00
-----------------	-----------

TOTAL FEE ENCLOSED \$ 130.00

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140. A duplicate copy of this sheet is attached.

901 North Glebe Road, 11th Floor
Arlington, Virginia 22203-1808

Telephone: (703) 816-4000

Facsimile: (703) 816-4100

MNL:slj

NIXON & VANDERHYE P.C.

By Atty: Michelle N. Lester, Reg. No. 32,331

Signature: 